

STATE PLAN ON SERVICES TO
MICHIGAN'S OLDER CITIZENS
FISCAL YEARS 2004–2006

FY 2005 Status Report
FY 2006 Amendments

STATE OF MICHIGAN
JENNIFER M. GRANHOLM, GOVERNOR

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APPROVED BY THE COMMISSION ON SERVICES TO THE AGING
JULY 15, 2005

VERIFICATION OF INTENT

The 2006 amendments to the State Plan on Services to Michigan's Older Citizens are hereby submitted for the State of Michigan. This amended Plan contains information on the third year of a three-year plan that began October 2003. It includes all assurances, provisions, information requirements, goals and strategies, and interstate funding formula requirements per AoA-PI-05-02.

The Office of Services to the Aging has been given the authority to develop and administer the State Plan in accordance with requirements of the Older Americans Act, and is primarily responsible for the coordination of all State activities related to the purposes of the Act. These responsibilities include, but are not limited to, the development of comprehensive and coordinated systems for the delivery of health and social services, and to serve as an effective and visible advocate for older adults in the State of Michigan.

This State Plan on Services to Michigan's Older Citizens has been developed in accordance with all federal statutory and regulatory requirements. It is hereby approved by designee of the Governor, and constitutes authorization to proceed with activities under the State Plan upon approval by the Assistant Secretary on Aging.

Signed:

Sharon L. Gire, Director
Michigan Office of Services to the Aging

Date

Jerutha Kennedy, Chair
Michigan Commission on Services to the Aging

Date

No one shall be excluded from participation in any service or activity because of race, age, sex, national origin or disability in compliance with Title VII of the Civil Rights Act of 1964.

INTRODUCTION

The Office and Commission on Services to the Aging are pleased to present an update to the multi-year State Plan for Services to Michigan's Older Citizens for FY 04-06. This update includes changes for fiscal year 2006, and describes the status for activities proposed for fiscal year 2005. **PLEASE NOTE THAT ALL NEW INFORMATION IS INDICATED IN BOLD TYPE.**

As background, this State Plan is required for federal funding under the Older Americans Act, and provides a blueprint for helping make the State of Michigan a wonderful place in which to grow old – a place where older people can live life on their own terms with dignity and sense of purpose. Inside you will find interesting information on aging policy initiatives and programs; how financial resources are allocated throughout the state; how programs are targeted to those in greatest need; and assurances required by the federal government in order to receive funding.

The Office of Services to the Aging (OSA) is the state unit responsible for developing and administering this State Plan on behalf of the State of Michigan. With its mission “to promote independence and enhance the dignity of Michigan's older persons and their families,” the OSA is the focal point for aging issues within state government. As an autonomous agency in the Department of Community Health, the OSA oversees Michigan's “aging network” – a partnership that has existed for some 30 years between the State of Michigan/OSA, 16 regional Area Agencies on Aging (AAAs), and a host of local community-based agencies that offer older adult services. The success of Michigan's service delivery system in enhancing life quality for older citizens is attributed to this partnership that has nurtured, over time, an environment for being responsive to consumer needs using cost effective approaches.

In preparation for the national 2005 White House Conference on Aging, the Office of Services to the Aging hosted five public forums in 2005 on four issues important to the well being of Michigan seniors – health (Detroit), economic security (Grand Rapids), caregiving (St. Ignace), and community (Troy and Saginaw). Over 600 people participated in these events, and their comments were considered in amending this State Plan.

This document has been reviewed and approved by the Michigan Commission on Services to the Aging. The fifteen-person Commission is appointed by the Governor to work with OSA on state aging policy. Among its duties, the Commission appoints the State Advisory Council on Aging to advise on aging issues.

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PROPOSED 2006 OSA APPROPRIATION

Appropriated Line-Items Title	Executive Budget Appropriation
Commission (Per Diem)	10,500
OSA Administration	5,188,600
Community Services	35,059,700
Nutrition Services	37,290,500
Senior Volunteer Services	5,574,900
Senior Citizen Centers Staffing	0
Employment Assistance	2,818,300
Respite Care	7,600,000
 Gross Appropriation	 \$93,542,500
 Total Federal Revenues:	 52,162,700
Title III	39,201,300
Title VII	646,800
USDA	7,400,000
Title V	2,958,300
Title XIX	1,156,300
MMAP	800,000
Total State Restricted Revenues:	7,767,000
Healthy MI Fund (Home Delivered Meals)	167,000
Abandoned Property Funds (Respite Care)	2,600,000
Tobacco Settlement Revenues	5,000,000
Miscellaneous Private Revenues	105,000
General Fund/General Purpose	33,507,800
 Gross Revenues	 \$93,542,500

Note: Please refer to the Appendix for the Area Agency on Aging resource allocation plan.

ALLOCATION OF RESOURCES

GREATEST ECONOMIC OR SOCIAL NEED

Required under Section 305(a)(2)(E) of the Older Americans Act

In the provision of services funded under this State Plan, preference will be given to those older persons with greatest economic or social need, with particular attention to low-income minority individuals and older individuals residing in rural areas.

"Greatest economic need" refers to the need resulting from an income level at or below the poverty threshold established by the federal government each year. The poverty level for 2005 is defined as **\$9,570** for a single individual and **\$12,830** for a family of two.

"Greatest social need" refers to the need caused by non-economic factors such as physical and mental disabilities, language barriers, and cultural, social or geographical isolation that restricts an individual's ability to perform normal daily tasks or threatens one's capacity to live independently.

Methods for giving preference to those with greatest economic/social need shall include:

- ✓ Application of weighting factors for low-income, minority, and rural older persons in the distribution of funds to each of 16 planning and service areas (PSAs).
- ✓ Assuring that Area Agencies on Aging (AAAs) target contracts for social services and nutrition in areas with high concentrations of older adults having the greatest economic and social need.
- ✓ Assuring that AAAs award Older Americans Act service contracts or subcontracts to minority-owned and operated organizations, at least in proportion to the number of minority persons of all ages residing within the PSA.
- ✓ Assuring AAAs target services for persons with physical and mental disabilities through earmarking state funds for in-home services and home-delivered meals for the frail elderly.
- ✓ Assuring that AAAs spend at least 105% of the amount spent in fiscal year 2000 under the Older Americans Act for services to older persons in rural areas.
- ✓ Requiring all contractors under Area Plans to assure that services are provided to low-income and minority elders in proportion to their relative needs as determined by regional surveys; insure that services to these groups are not reduced. As part of the Area Plan development process, all AAAs are required to conduct comprehensive surveys of need within the PSA, and to utilize demographic data in targeting services.

TARGETING SUMMARY

This chart represents a comparison of older adults in greatest economic and social need served in Michigan for fiscal years 2003 and 2004 (latest statistics available).

	Michigan Pop. 60+	% of Pop. 60+	% Served 2003*	% Served 2004*
Total Population 60+	1,596,162		28.07%	23.8%**
Non-minority	1,400,703	87.75%	14.92%	13.6%
African American	160,741	10.07%	31.10%	29.7%
Hispanic	18,653	1.17%	33.61%	20.1%
Asian/Pacific Islander	12,298	0.77%	10.62%	14.8%
Native Amer./Alaskan	4,658	0.29%	49.68%	59.9%
Other/Multi-racial	17,762	1.11%	15.38%	25.2%
Rural	427,733	17%	49.40%	37.7%
Low-income	264,800	16.59%	33.71%	32.5%

~Taken from National Aging Program Information System (NAPIS)

**Includes clients in registered and non-registered services. Registered services data is unduplicated and based on client enrollment forms. In addition to registered services, OSA serves 265,493 clients in non-registered services. Non-registered services do not require client enrollment and may include duplication.*

***Decrease in % of persons served from 2003 to 2004 is largely due to changes in reporting that resulted in more accurate accounting of clients served in non-registered services.*

Note: Race is self-reported by client.

INTRASTATE FUNDING FORMULA

Required under Section 307(a)(3)(A) of the Older Americans Act

The intrastate funding formula was reviewed pursuant to Older Americans Act requirements and no changes have been made from the previous planning cycle. Michigan is divided into 16 Planning and Service Areas (PSA), and each is served by an Area Agency on Aging. Older Americans Act funds are allocated using the following weighted formula:

State Weighted Formula Percentage for PSA =	# aged 60 and over in PSA	+	# aged 60 and over at or below 150% of poverty in PSA	+	# aged 60 and over nonwhite in PSA + .5 x level in PSA
	# of people aged 60 and over in state	+	# aged 60 and over at or below 150% of poverty in state	+	# aged 60 and over nonwhite in state + .5 x in state

The 2000 Census was used to calculate funding available to each PSA. Each PSAs percentage of the state's weighted population is calculated by adding:

- ✓ the number of persons aged 60+,
- ✓ the number of persons aged 60+ with incomes at or below 150% of the poverty level and,
- ✓ ½ the actual number of minority elders.

The sum of these factors is then divided by the state's total weighted population after a base, determined by the number of square miles, is subtracted.

Formula Factor Importance

<u>Factor</u>	<u>Weight</u>	x	<u>Population</u>	=	<u>Weighted Population</u>	<u>% of Funds Distributed by Factor</u>
60+	1.00	x	1,596,162	=	1,596,162	81.49
Low-income	1.00	x	264,800	=	264,800	13.52
Minority	.50	x	195,459	=	97,730	4.99
TOTAL				=	1,958,692	100.00

Funding for each PSA has two components: administrative funds and service category funds.

- ✓ Administrative funds = federal + state administrative funds
- ✓ Service categories = Titles III-B, III-C1, III-C2, III-D, III-E, St-HDM, St-A/C, St-SCS

92.5% of total funding is distributed based on the state weighted formula percentage;
7.5% is distributed based on the percentage of state geographical area.

GEOGRAPHIC BASE

Prior to applying the formula factors, 7.5% of state and federal service funds are subtracted from the service total and distributed to each PSA according to its share of the total square miles in the state.

Service Category Funds for PSA	=	PSA's State Weighted Formula Percentage	x	92.5% of Service Category Funds	+	% of State Geog. Area (square miles)	x	7.5% of Service Category Funds
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2000 WEIGHTED AND GEOGRAPHIC FORMULAS

Area Agency on Aging	Population 100% 60+	Population 150% of Poverty	Population 50% of Minority	Weighted Funding Formula	AAA Square Miles	Geographic Formula
1A	147,806	42,530	53,250	12.44%	154	0.27%
1B	419,023	51,594	13,805	24.73%	3,922	6.90%
1C	171,279	22,322	5,771	10.18%	460	0.81%
02	51,260	8,342	957	3.09%	2,058	3.62%
3A	35,255	5,040	1,252	2.12%	562	0.99%
3B	33,728	6,147	1,275	2.10%	1,266	2.23%
3C	18,733	3,265	267	1.14%	1,012	1.78%
04	52,334	10,510	2,622	3.34%	1,683	2.96%
05	90,643	14,120	5,782	5.64%	1,836	3.23%
06	59,807	8,088	2,174	3.58%	1,711	3.01%
07	128,011	23,665	3,315	7.91%	6,605	11.62%
08	140,233	23,965	3,745	8.57%	6,008	10.57%
09	59,753	11,575	330	3.66%	6,816	11.99%
10	55,833	9,300	372	3.34%	4,724	8.31%
11	67,470	14,215	906	4.22%	16,411	28.87%
14	64,994	10,122	1,907	3.93%	1,614	2.84%
Totals	1,596,162	264,800	97,730	100.00%	56,842	100.00%

**COMPARISON OF WEIGHTED FUNDING
FORMULA
1990-2000**

Area Agency on Aging	1990	2000	Differenc e 1990- 2000
1A	16.21%	12.44%	-3.77%
1B	22.66%	24.73%	2.07%
1C	10.30%	10.18%	-0.12%
02	3.07%	3.09%	0.02%
3A	2.02%	2.12%	0.10%
3B	2.11%	2.10%	-0.01%
3C	1.14%	1.14%	0.00%
04	3.41%	3.34%	-0.07%
05	5.29%	5.64%	0.35%
06	3.32%	3.58%	0.26%
07	7.63%	7.91%	0.29%
08	8.31%	8.57%	0.26%
09	3.38%	3.66%	0.28%
10	2.93%	3.34%	0.41%
11	4.56%	4.22%	-0.35%
14	3.66%	3.93%	0.27%
Totals	100.00%	100.00%	0.00%

AREA AGENCIES ON AGING & GEOGRAPHIC AREAS SERVED

REGION 1-A	DETROIT AREA AGENCY ON AGING, 313/446-4444, <i>serving cities of Detroit, the Grosse Pointes, Hamtramck, Harper Woods, Highland Park</i>
REGION 1-B	AREA AGENCY ON AGING 1-B, 248/357-2255, <i>serving Livingston, Macomb, Monroe, Oakland, St. Clair, Washtenaw Counties</i>
REGION 1-C	THE SENIOR ALLIANCE, INC., 734/722-2830, <i>serving all of Wayne County, excluding areas served by Region 1-A</i>
REGION 2	REGION 2 AREA AGENCY ON AGING, 517/467-2204, <i>serving Hillsdale, Jackson, Lenawee Counties</i>
REGION 3-A	REGION 3-A AREA AGENCY ON AGING, 269/373-5147, <i>serving Kalamazoo County</i>
REGION 3-B	REGION 3-B AREA AGENCY ON AGING, 269/966-2450, <i>serving Barry, Calhoun Counties</i>
REGION 3-C	BRANCH/ST. JOSEPH AREA AGENCY ON AGING IIIC, 517/279-9561, <i>serving Branch, St. Joseph Counties</i>
REGION 4	REGION IV AREA AGENCY ON AGING, INC., 616/983-0177, <i>serving Berrien, Cass, Van Buren Counties</i>
REGION 5	VALLEY AREA AGENCY ON AGING, 810/239-7671, <i>serving Genesee, Lapeer, Shiawassee Counties</i>
REGION 6	TRI-COUNTY OFFICE ON AGING, 517/887-1440, <i>serving Clinton, Eaton, Ingham Counties</i>
REGION 7	REGION VII AREA AGENCY ON AGING, 989/893-4506, <i>serving Bay, Clare, Gladwin, Gratiot, Huron, Isabella, Midland, Saginaw, Sanilac, Tuscola Counties</i>
REGION 8	AREA AGENCY ON AGING OF WESTERN MICHIGAN, INC., 616/456-5664, <i>serving Allegan, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Newago, Osceola Counties</i>
REGION 9	REGION IX AREA AGENCY ON AGING, 989/356-3474, <i>serving Alcona, Alpena, Arenac, Cheboygan, Crawford, Iosco, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle, Roscommon Counties</i>
REGION 10	AREA AGENCY ON AGING OF NORTHWEST MI, INC., 231/947-8920, <i>serving Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, Wexford Counties</i>
REGION 11	UP AREA AGENCY ON AGING, 906/786-4701, <i>serving Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinac, Marquette, Menominee, Ontonagon, Schoolcraft Counties</i>
REGION 14	SENIOR RESOURCES, 231/739-5858, <i>serving Muskegon, Oceana, Ottawa Counties</i>

STATE PLAN ON SERVICES TO MICHIGAN'S OLDER CITIZENS
GOALS, STRATEGIES, AND INDICATORS OF CHANGE
FISCAL YEARS 2004 – 2006

GOAL I.

**MAINTAIN OR IMPROVE THE HEALTH AND NUTRITIONAL STATUS OF
OLDER ADULTS TO DELAY THE NEED FOR MORE COSTLY CARE**

Nutrition programs have a direct impact on the well-being and independence of older adults. Whether serving a homebound person with special dietary requirements or a frail older adult in a congregate setting, the nutrition program is a key component to a broader continuum of care. Through the provision of sustenance, the meal program supports families in caring for loved ones in their home so they are not placed in institutional settings earlier than necessary. Research in Michigan has shown that frailty and chronic illness are often characteristic of those served by the aging network. Adequate nutrition plays a major role in preventing and managing chronic disease. In addition, appropriate physical exercise, chronic disease self-management, and access to mental health services can also have a positive impact on frailty, and stave off problems arising from isolation and depression.

I. A. NUTRITION SERVICES STRATEGY

Provide basic nutrition and subsistence to vulnerable older persons.

Indicators:

1. Improve or maintain the condition of older adults with chronic illnesses served in the program.

- By 9/30/05, expand by a minimum of ten (10) the number of senior centers and congregate nutrition sites offering exercise programs. **Completed.**

Revise language:

- Through 9/30/06, assist older adults to access **the new Medicare Prescription Drug Coverage and other** public and private prescription drug programs.

2. Minimize reductions in services resulting from loss of state resources.

- By 9/30/05, increase total number of meals served by 5%.

While data on total number of meals served will not be available until September, this goal is not expected to be met due to increases in fixed costs, such as gasoline prices and supply chain costs.

Revise:

- **By 9/30/06, maintain the total number of meals served at FY 05 levels.**

3. Improve the nutritional quality and consumer taste acceptance of meals served in nutrition programs.

- By 9/30/05, collect baseline data on customer satisfaction with meals; where necessary, implement changes to increase satisfaction by 5%. **Completed.**
- Each fiscal year conduct or facilitate a minimum of one nutritional quality/food safety training for aging network nutrition service providers. **Completed for FY 05.**

4. Improve use and analysis of nutritional risk assessment and ADL/IADL (activities of daily living/instrumental activities of daily living) data as a means of identifying individuals with multiple service needs and measuring program effectiveness at preventing decline.

Date change:

- By 9/30/06, increase incidence of reported nutritional risk status for home delivered meals program clients from 90% to 95%.
NAPIS systems changed effective 10/1/04 to capture nutritional risk raw scores. Data from FY 05 will be considered baseline for raw score collection.

- By 9/30/05, determine incidents of nutritional risk reduction in 10% of program participants.

Delete indicator:

OSA and AAA nutritionists indicate tool is too subjective and should not be the basis for measuring a reduction of nutritional risk.

5. Increase access to congregate nutrition services.

- By 9/30/05, conduct analysis of location of congregate meal sites in relation to location of those in greatest economic and social need to determine accessibility for vulnerable populations. **Completed.**
- By 9/30/06, improve site participation by 2% through improved efficiencies and tapping other resources.

6. Implement a Senior Farmers' Market Nutrition Program or similar initiative that links older adults with fresh fruits and vegetables through regional farmers' markets and roadside stands.

- In FY 05 and 06, seek increase in funding; expand program to additional counties as funding and staff resources allow. **Completed for FY 05.**

- In FY 05 and 06, partner with WIC (Department of Community Health-Women, Infants & Children) and Michigan State University (MSU) Extension to implement and expand program. **Completed for FY 05.**

I. B. HEALTH PROMOTION STRATEGY

Increase availability of targeted health promotion and disease prevention programs to arrest and reduce consequences of chronic disease.

Indicators:

1. Share information on funding opportunities for wellness and prevention programming with AAAs on a quarterly basis. **Completed.**
2. Indicator completed in FY 2004.
3. By 9/30/05, establish new physical activity programming in a minimum of ten (10) congregate meal sites and/or senior centers. **Completed.**

I.C. HEALTH EDUCATION STRATEGY

Improve quality of life for older adults served by the nutrition program through the delivery of health education resources to providers, older adults and caregivers.

Indicators:

1. Update health education materials on OSA's miseniors.net website on a monthly basis. **Completed.**
2. Through 9/30/06, make chronic disease-specific educational resources available through the miseniors.net website and through direct distribution of materials to AAAs as a means of partnering with them in providing health education to at-risk and medically underserved population groups as well as to the general public. **Completed for FY 05.**
3. By 9/30/05, undertake review of service standards for health education, nutrition education, and disease prevention/health promotion; make necessary updates and terminology modifications. **Completed.**
4. Increase the provision of nutrition counseling, nutrition education, and health promotion in aging network programs.
 - By 9/30/05, increase by 10% over FY 04. **Completed.**
 - By 9/30/06, increase by 10% over FY 05.

Add:

- 5. By 9/30/06, increase by three the number of chronic disease self-management programs being offered within the aging network.**
- 6. By 9/30/06, offer at least two education/training workshops on health and wellness issues targeting staff of senior centers, local health departments, and Area Agencies on Aging.**
- 7. Work with Michigan State University Extension and the Cool Cities Initiative on the Elder Friendly Communities certification process.**
 - **By 9/30/2006, the certification process will be finalized for Elder Friendly Communities.**
 - **By 9/30/2006, three new municipalities will apply for Elder Friendly Community designation.**

I. D. MENTAL HEALTH SERVICES STRATEGY

Increase the availability of mental health services to older adults and their caregivers.

Indicator:

1. Each fiscal year, using the September 2002 data for Indicator 19 as the baseline, collect, review, compare, and analyze the ratio of penetration for older adults in CMHSPs. Older adults are an under-served population in the public mental health system. The Department of Community Health (DCH) monitors access to mental health services by using the Mission-Based Performance Indicator System. Indicator 19 is "Access: Penetration Rate-Ratio of the percentage of Community Mental Health Services Programs (CMHSP) caseload over the age of 65."

Data is not yet available for analysis.

2. By 9/30/05, provide materials on mental health and aging to the Area Agencies on Aging whose CMHSP penetration rate is below a ratio of .40. **As above, data is not yet available for analysis.**

Revise date:

3. By **9/30/06**, make mental health anti-stigma messages available on the OSA website.

4. By 9/30/05, assemble materials on co-occurring depression and chronic disease, and distribute to all Area Agencies on Aging. **Completed.**

5. By 9/30/05, review and analyze health care utilization data for older adults available from MPRO - Michigan's Medicare Quality Improvement Organization - to identify characteristics of older adults with co-occurring diseases. **Completed.**

6. By 9/30/05, increase the number of Area Agency on Aging staff attending the mental health and aging conference sponsored by the Department of Community Health. **Completed.**

I. E. OLDER VOLUNTEER SERVICES STRATEGY

Improve the socialization and perceived well being of older volunteers enrolled in the Retired & Senior Volunteer Program, Senior Companion Program, and Foster Grandparent Program, through participation in a variety of meaningful volunteer opportunities.

Indicators:

1. A statewide volunteer survey will be conducted and disseminated by 9/30/05 and will report on the percentages of participating volunteers who indicate:
 - a presence of purposeful activity in their lives,
 - an increase in out-of-house activities,
 - a perceived sense of usefulness,
 - an increase in friendships and social opportunities,
 - the development of new skills and knowledge,
 - satisfaction with volunteer assignments,
 - opportunities for community recognition,
 - they would recommend program participation to others. **Completed.**

GOAL II.

IMPROVE ACCESS TO INFORMATION AND SERVICES THAT ENABLE OLDER ADULTS AND THEIR CAREGIVERS TO RECEIVE COST EFFECTIVE CARE IN THE LEAST RESTRICTIVE SETTING

Over 12 million Americans need assistance from others to carry out everyday activities; 84% of persons over age 65, and 95% of persons over age 85, want to stay in their own homes. The majority of these persons live at home or in community settings where 85% of the care is provided by their family or caregivers. In Michigan, there are 443 nursing homes, 189 homes for the aged, and 4,294 adult foster care homes collectively serving over 97,000 individuals. As the growth of Michigan's aging population continues to exceed available resources to address the corresponding demand for services, a full range of affordable home and community-based care options is needed to contain costs, facilitate consumer choice, and support caregivers. In Michigan, some 400,000 older adults were served last year by programs funded by the Older Americans Act, including congregate/home delivered meals, home care, adult day, and caregiver services. While the trend toward community-based services is being supported at the federal level, it is also necessary to work toward quality of life and care for those older adults who reside in Michigan's long term care facilities. Additionally, Michigan will need to increase its direct care workforce by about 32% while, concurrently, providing comprehensive recruitment, training, and retention programs.

II. A. CARE MANAGEMENT, CASE COORDINATION/SUPPORT, AND IN-HOME SERVICES STRATEGY

Promote the continued development of community-based, long term care service delivery systems as alternatives to traditional models of institutional-based care.

Indicators:

1. Expand the practice of cost sharing as a method to expand the financial base available to support services; increase program income by 5% each fiscal year. **Completed.**
2. By 9/30/05, develop models for implementing self-determination and consumer direction within Older Americans Act-funded programs in at least one PSA. **Completed.**
3. By 9/30/06, increase the capacity of non-profit public and private organizations to address important human and community needs through the placement and support of older volunteers.
4. Throughout FY 05, OSA will participate as a voting member on the Governor's newly appointed Medicaid Long Term Care Task Force. In this role, OSA will be involved in

setting short term goals and developing long term solutions to strengthen community-based care for older adults. During this process, OSA will provide staff support in the development of recommendations and reports. **Completed.**

II. B. INFORMATION AND ASSISTANCE STRATEGY

Improve the effectiveness of the aging network to respond accurately and timely to any request for information from older adults and caregivers.

Indicators:

1. Indicator for FY 04 – complete.
2. By 9/30/05, increase by 5% the number of Information and Assistance programs in the aging network who have employees and/or volunteers who are Certified Information and Referral Specialists (CIRS) by the Alliance of Information and Referral Programs (AIRS). **Completed.**
3. By 9/30/05, at least 20% of AAAs will have directly assisted in the implementation of local 211 information systems. **Completed.**
4. Participate in Governor Granholm's faith-based initiative in an effort to reach out to older adults through faith-based organizations; by 9/30/05, attend bi monthly meetings of this Coalition, and participate in planning and implementing a conference aimed at educating the faith-based community about available resources. **Completed.**

Add:

5. By 9/30/06, a communications plan will be in place to educate the public about aging services. This will include the establishment of an Area Agency on Aging communications group. Information will be disseminated through direct mail, the OSA website, the media, and the office e-newsletter.

6. By 9/30/06, facilitate the connection of the AAA network and Michigan foundations interested in developing partnerships around aging issues.

II. C. TARGETED OUTREACH STRATEGY

Ensure that minority and socially isolated older adults have access to culturally appropriate services.

Indicators:

1. Each fiscal year, older minority, Hispanic and rural older adults will receive aging network services at least in proportion to the percentage of total older minority, Hispanic and rural population.

Refer to Targeting Summary on page 7.

2. By 9/30/06, bilingual written material and personnel will be available in those areas where 10% of the population is non-English speaking.

Date change:

3. By **9/30/06**, 200 older refugees will be served by at least one of the ongoing programs administered by the AAAs.

Delays in receiving Refugee funds from the Michigan Department of Human Services, and then allocating funds to AAAs 1A, 1B, 1C, 6, and 8 precluded completing this goal in FY 05.

Add:

4. By 9/30/06, develop a strategic plan that addresses cultural and diversity awareness, sensitivity, and competence in planning and implementing aging programs.

II. D. STRATEGY FOR CAREGIVER MEDIATION, RESPITE CARE, ADULT DAY SERVICES AND WORKING CAREGIVERS

Extend the time that caregivers, including those who are involved in kinship care, are able to care for their loved ones in the community.

Indicators:

1. By 9/30/06, data from the State Court Administrative Office and local courts will indicate how many petitions for guardianship were diverted from the court system by the use of caregiver mediation. Results from the Center for Social Gerontology pilot projects will provide information on how best to promote the benefits of caregiver mediation, and how to train and recruit additional mediators trained in these issues in all areas of the state.

2. By 1/31/05, data will be available to demonstrate that 3,500 caregivers were provided 440,000 hours of relief from their caregiving responsibilities.

Completed.

3. Indicator for FY 2005 – completed.

4. By 9/30/05 and again by 9/30/06, Adult Day Service programs will expand capacity in targeted counties by 5% each year. **Completed for FY 05.**

5. By 1/31/05, data will be available that demonstrates that Adult Day Service programs in targeted counties served 100 additional recipients over the prior year. **Completed.**

6. By 9/30/05, 100 people will be trained on the development and operation of Adult Day Service programs. **Completed.**

7. By 9/30/05, informational packets will be developed and distributed to 200 employers, unions, and human resource professional organizations on employer-driven supports for working caregivers. **Completed.**

Date change:

8. By **9/30/06**, ten presentations will be provided to employers, unions and human resource professional organizations on the needs of working caregivers and community resources available to support them.

II. E. LONG TERM CARE STAFFING STRATEGY

Work toward establishing and sustaining well-trained and committed direct care workers employed across the full spectrum of long term care settings; such settings may include one's own home, adult foster care homes, assisted living facilities, homes for the aged, hospitals, and nursing homes.

Indicators:

1. By 9/30/06, promote and implement statewide a centralized direct care worker recruitment, training, and retention model based upon "best practice" models.
2. By 9/30/06, support community-based organizations and state agencies in developing initiatives/programs and writing grants to improve the recruitment, training, and retention of direct care workers
3. By 9/30/06, develop a plan for offering affordable health care insurance to Michigan's direct care workers and their families.

II. F. EDEN ALTERNATIVE AND OTHER BEST PRACTICES STRATEGY

Work to expand the Eden Alternative and other best practices in Michigan's nursing homes, home for the aged, adult foster care homes and assisted living facilities; such practices shall focus on culture change that values person-centered care, improvements in life quality, and supportive environments for workers in these settings.

Indicators:

Revise date:

1. BEAM (Bringing the Eden Alternative to Michigan) will continue to be an effective coalition of consumers, long term care providers, aging network and government agency representatives collaborating on projects that improve quality of life and care in long term care settings; conduct a survey to determine program effectiveness by **9/30/06**.
2. Indicator for FY 2004 – completed.
3. By 9/30/06, grants will be submitted to grantors to expand the Eden Alternative™ in Michigan and pilot other options for long term care culture change.

Revise date:

4. By **9/30/06**, local groups will sponsor community forums focused on culture change and best practices in long term care.

II. G. DEMENTIA SERVICES STRATEGY

Increase the capacity of the aging network to serve older adults with dementia, as well as their caregivers.

Indicator:

Date change:

1. By **1/30/06**, analyze OSA service utilization data to track the nature and level of services provided to people with dementia, as well as family members providing care.

II. H. EMERGENCY MANAGEMENT COORDINATION STRATEGY

Improve older adults' safety and access to essential services during emergency situations by enhancing the aging network's emergency preparedness.

Indicators:

1. Indicator from FY 2004 – completed.
2. Indicator from FY 2004 – completed.
3. By 12/31/05, develop an OSA Building Emergency Action Plan, and provide appropriate staff training and drills on the plan to improve the personal safety of OSA staff and guests in times of emergency or disaster. **Completed.**

II. I. AGING INFORMATION SYSTEM (AIS) STRATEGY

Improve service capacity of the aging network by expanding funding sources for community-based care, i.e. Medicaid, Medicare, private pay, other federal/state resources.

Indicators:

1. Indicator for FY 2004 – completed.
2. By 9/30/05, the AIS Partner Channel NAPIS application will include a caregiver reporting module. This caregiver component will allow for an integrated view of caregiver support services funded across three different funding streams - Title IIIIE of the Older Americans Act, Tobacco Settlement monies for respite services, and Blue Cross & Blue Shield of Michigan Escheats funds. **Completed.**
3. By 9/30/06, the AIS will include enterprise reporting functionality that will allow state and local agency executives to develop comprehensive views of the service system and customer characteristics in their area. This information will help in planning and service delivery efforts, and should result in greater public awareness of local efforts to support long term care needs within each PSA.

II. J. LONG TERM CARE PUBLIC INFORMATION STRATEGY

Publish information about long term care for the general public.

Indicators:

1. Indicator for FY 2004 – completed.
2. By 9/30/05, provide Internet-based resources that enable older adults and their caregivers to identify care options available in their community. **Completed.**
3. By 9/30/06 and through the miseniors.net *Caregivers Corner*, support adult caregivers, employers who are looking to assist their employees who have caregiving responsibilities, and professional caregivers who are looking to improve their skills.

GOAL III.
**PROMOTE FINANCIAL INDEPENDENCE AND SAFEGUARD THE ECONOMIC
SECURITY OF VULNERABLE OLDER ADULTS**

For many older adults economic security, like health, is of vital concern, and the two are often linked. Moreover, older persons may have fewer options to maintain or improve their standard of living, especially older adults living on low and fixed incomes. According to the 2000 U.S. Census, nearly 100,000 older adults in Michigan live at or below the federal poverty level. Additionally, there are 339,905 older adults aged 65 and over living at about 200% or less of poverty who are unable to qualify for federal/state-based support programs. For these older adults and those living on fixed incomes, employment opportunities and access to public health/long term care information and services are crucial. Effective services and informed decisions regarding retirement, health/long term care, and employment can benefit both older adults and the State of Michigan. Access to these services and information means greater economic freedom for older adults, either through work, stipended volunteer service, or the ability to maintain the income and savings they have. Programs that help individuals understand and plan for retirement and long term care mean fewer individuals relying solely on publicly funded services.

III. A. LONG TERM CARE EDUCATION STRATEGY

Educate older adults and their families about private and public long term care financing to meet personal care needs.

Indicators:

1. Indicator for FY 2004 – completed.

Delete:

2. By 9/30/05, implement a demonstration project on consumer behavior in long term care.

The Michigan Medicare/Medicaid Assistance Program did not receive grant funds to achieve this objective.

III. B. SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM STRATEGY

Increase employment assistance services to eligible older persons served by the Senior Community Service Employment Program.

Add:

1. By 6/30/06, realize 23% placement rate, the number of program participants transitioned off of employment program to private, unsubsidized employment versus the total authorized number of subsidized positions.

2. By 6/30/06, serve 602 program participants or 148% over the number of authorized positions.

3. By 6/30/06, measure the starting wage in unsubsidized employment versus the subsidized wage while on the program. This is now measured by the new data collection system.

III. C. FOSTER GRANDPARENT PROGRAM AND SENIOR COMPANION PROGRAM STRATEGY

Provide stipended volunteer opportunities to low-income older adults through the Foster Grandparent Program and Senior Companion Program so that they may serve at-risk children and other older adults at no cost to themselves.

Indicator:

1. Each year from FY 04 through FY 06, ensure that a minimum of 1,350 low-income older adults receive stipends as Foster Grandparent and Senior Companion volunteers.
Completed for FY 05.

III. D. BLUE CROSS/BLOCK SHIELD OF MICHIGAN (BCBSM) INSURANCE RATES STRATEGY

Work to ensure that Blue Cross/Blue Shield of Michigan health insurance rates are equitable and affordable for individual older adults, thereby complying with their legal mandate to provide access to health care coverage to all who apply.

Indicators:

1. Through 9/30/06, preserve Public Act 350's senior subsidy, rate review and approval process; standing of the Attorney General in contested rate cases; and prohibition of age rating and medical underwriting for BCBSM's "other than group" Medicare Supplement insurance line.

2. Through 9/30/06, limit rate increases for BCBSM's "other than group" Medicare Supplement insurance to less than 10%.

III. E. MEDICARE/MEDICAID ASSISTANCE PROGRAM (MMAP) STRATEGY

Empower Medicare and Medicaid beneficiaries and their families to make informed health care decisions by providing objective and unbiased information, education, advocacy, and consumer protection services.

Indicator:

1. By 9/30/06, federal funding and support for MMAP will remain constant; service levels tracked through the statewide MMAP reporting system will be maintained or increased; and the use of MMAP data by policy makers will be documented.

III. F. AGING INFORMATION SYSTEM (AIS) STRATEGY

Facilitate an older person's ability to apply for public benefits, such as food assistance and Medicaid, in addition to the Senior Community Service Employment Program and the senior volunteer programs intended for low-income older adults.

Indicators #1 and #2 completed in FY 2004.

GOAL IV.
PROTECT MICHIGAN SENIORS, ESPECIALLY THOSE AT RISK,
FROM ABUSE AND EXPLOITATION

The federal Older Americans Act requires states to provide leadership in developing and coordinating a comprehensive system for vulnerable elder rights protection. Michigan also has specific mandates to implement the Long Term Care Ombudsman Program, elder abuse prevention, legal services, outreach, and counseling and assistance programs. The average monthly number of cases opened by the state's Adult Protective Services office more than doubled in Michigan from 1992 through 2002. Adults over age 65 represent 60% of all substantiated cases of harm; the single most vulnerable age group is individuals over age 75. In this light, the Office of Services to the Aging has emphasized the importance of protecting older adults from victimization and exploitation, and resources have been devoted to developing/expanding partnerships to address this issue. Such partnerships include the Senior Exploitation and Abuse Quick Response Team and Triads – local coalitions of law enforcement agencies, older adults, and consumer organizations. The State has also promoted alternatives to guardianship, as well as improving guardianship service provision.

IV. A. STATE LONG-TERM CARE OMBUDSMAN STRATEGY

Assist residents of long term care facilities and their families to become informed consumers through access to information, advocacy, and consumer protection services.

Indicators:

1. By 9/30/05, increase by 10% the number of trained volunteers available to provide ombudsman services to residents of licensed long term care facilities. **Completed.**
2. By 9/30/05, develop materials for distribution by e-mail and through OSA's mi.seniors.net website for best practices in the areas of information and referral, mediation options, and empowering nursing home residents. **Completed.**
3. By 9/30/05, provide a draft addenda to the Nursing Home Closure Interagency Agreement for adoption by the State Nursing Home Closure Team. This Agreement delineates responsibilities and protocols in situations that threaten the safety and welfare of nursing home residents, i.e. heating and cooling emergencies, natural disasters, and communicable disease management. **Completed.**
4. By 9/30/05, the Ombudsmanager data system will be used to produce quarterly and NORS reports; review report data to identify trends, issue areas, and program enhancement opportunities. **Completed.**

Add:

5. By 9/30/06, gain agreement by the State Nursing Home Closure Team on adoption of new language for the State Nursing Home Closure Agreement – new language includes responsibilities and protocols for long term care ombudsmen in the event of nursing home closure or emergency evacuation.

6. Continue use of the Ombudsmanager data system; provide refresher training to local ombudsmen staff on use of Ombudsmanager; produce quarterly and annual NORS reports; review data to identify trends, issue areas, and program enhancement opportunities.

IV. B. LEGAL ASSISTANCE STRATEGY

Improve the quality and quantity of legal services available for vulnerable adults.

Indicators:

1. Host at least one training event annually for legal service providers and other advocates and advocacy agencies that protect the rights and autonomy of vulnerable seniors. **Completed.**

Revise date:

2. By **9/30/06**, all legal services providers will provide report data and narrative information in electronic format; the legal services reporting system will have annual (and quarterly or biannual) reporting capabilities.

3. By 9/30/05, make available the annual legal services report, including analysis, to the public and interested agencies. **Completed.**

4. By 9/30/06, complete a work plan to increase legal services for under-served populations identified through legal service reporting analysis.

IV. C. SENIOR EXPLOITATION AND ABUSE QUICK RESPONSE TEAM STRATEGY (SEAQRT)

Improve the dissemination of information about physical abuse and financial exploitation throughout the community; educate law enforcement agencies and prosecutors regarding successful tactics for prosecuting cases.

Indicators:

Move to IV. G. – Task Force on Elder Abuse Strategy:

1. By 9/30/05, progress will be made on implementing a statewide, unified reporting structure (between social service and law enforcement entities) for reporting cases of elder abuse.

2. By 9/30/05, SEAQRT will meet at least five times/year and develop/maintain a group list serv for immediate communication and access. **Completed.**

3. SEAQRT will support (through in-kind support, grants, etc.) elder abuse prevention and assistance training efforts for seniors and agencies, including efforts to train prosecutors and law enforcement. **Completed.**

IV. D. TRIAD STRATEGY

Improve cooperation among police agencies and community groups to inform older adults of fraudulent consumer practices and how to pursue legal action when exploitation has occurred.

Indicators #1 - #3 were completed in FY 2004.

IV. E. GUARDIANSHIP AND ALTERNATIVES STRATEGY

Improve the delivery of guardianship services and encourage use of less intrusive alternatives.

Indicators:

1. By 9/30/06, use surveys to determine if interested organizations regularly provide information on alternatives to the public, and if courts provide information about local service; track visitors to OSA's mi.seniors.net website to measure interest in information about alternatives to guardianship.

Revise date:

2. By **9/30/06**, at least 10 probate courts will use the national standards as a tool to monitor guardian performance; increase from 40 to 80 the number of registered guardians tested through the National Guardian Foundation; use the national standards as a program requirement for provision of professional guardianship services.

IV. F. AGING INFORMATION SYSTEM STRATEGY

Provide access to information about abuse and exploitation; empower the general public to report suspected victimization of older adults.

Indicators:

1. By 9/30/05, deploy an Ombudsman Information System that local and state ombudsmen can use to:
 - capture needed information about their activities and customers;
 - track complaints about care in nursing homes;
 - manage NORS reportable cases;
 - develop custom reports for AAAs and OSA, and,
 - prepare reports for the Administration on Aging. **Completed.**

Revise language:

Throughout FY 06, state and local ombudsman staff will use the Ombudsmanager data system to:

- capture needed information about their activities and customers;
- track complaints about care in nursing homes;
- manage NORS reportable cases;
- develop custom reports for AAAs and OSA, and,
- prepare reports for the Administration on Aging.

2. By 9/30/05, issues of the “Resources for Aging” e-newsletter will be published bi-monthly by OSA and disseminated to the aging network. This electronic newsletter - provided as a public service at no cost - provides timely information about aging network news, events and resources. **Completed.**

Revise language:

IV G. TASK FORCE ON ELDER ABUSE STRATEGY

Develop and implement the Governor’s directive establishing a state level **Task Force on Elder Abuse** designed to protect senior citizens from criminal abuse and/or financial exploitation.

Indicators:

1. Indicator for FY 2004 – completed.

2. By January 2005, the task force will begin meeting. **Completed, although the Task Force was officially announced in May 2005 and began meeting in June 2005.**

3. By April 2005, Elder Justice/Abuse Task Force members will receive background information to develop a common working knowledge base of the issues surrounding abuse, neglect and financial exploitation. **Completed. The Task Force received materials in June 2005.**

Date revisions for indicators #4-6:

4. By **May 2006**, the Task Force will disseminate a user-friendly catalogue of all resources in the local communities for use in investigation and prosecution of elder abuse and exploitation.

5. By **May 2006**, the Task Force will have completed a review of all relevant laws and regulations concerning the investigation and prosecution of elder abuse and exploitation.

6. By **May 2006**, the Task Force will issue a preliminary report of recommendations to strengthen or develop Michigan’s system(s) of protection of senior citizens from abuse, neglect, and financial exploitation.

Add:

7. By 5/31/06, social service and law enforcement entities will begin to review options for statewide elder abuse reporting for cases outside of the Adult Protective Service systems. A review of unified reporting options is a charge of the Task Force on Elder Abuse

GOAL V.

EXTEND THE TIME THAT ELDERLY CITIZENS CURRENTLY LIVING IN THEIR OWN HOMES, APARTMENTS, OR SUPPORTED LIVING ARRANGEMENTS ARE ABLE TO REMAIN THERE

The vast majority of persons aged 60 and older prefer to stay in their own homes rather than almost any other setting. Their ability to do so is compromised by a variety of factors, such as injury and loss of mobility due to falls or chronic disease, loss of spouse, decline of housing stock due to age, and lack of available resources for home repair or modification. For those who can't afford to own or maintain their homes, affordable rental and other supportive housing options are important to maintaining independence, however, most assisted living is too expensive for those on fixed incomes. Developing affordable, livable housing for older adults in Michigan will require gaining significant knowledge about how aging and housing-related organizations, non-profits, and other interested parties can work in partnership with developers to fill local gaps in elderly housing. Technical assistance is necessary for local groups to develop needed senior housing.

V. A. (falls and serious injury strategy), V.C. (housing options strategy), V.D. (housing information strategy), and V.E. (temporary/emergency housing strategy) are being significantly modified for FY 06. It was found that:

- 1) baseline measures in most of these strategies could not be accurately determined, and therefore, could not be used as a measure of change or impact, and**
- 2) some baseline measures that could be measured by OSA included outcomes that experts determined could not be correlated to positive change – there were too many other, larger factors that influenced outcomes.**

V. A. FALLS AND SERIOUS INJURY STRATEGY

Delete:

Decrease the frequency of falls among older adults that occur within their residences and result in serious injuries, i.e. broken hips, broken bones

Change to:

Increase the availability of fall prevention materials to help contain the incidence of falls among older adults that result in serious injury.

Indicators:

Delete #1-4:

1. By 9/30/06, establish a baseline for the average age of persons entering Michigan nursing homes upon admission.

2. By 9/30/06, the average age of persons entering Michigan nursing homes upon admission will increase by at least one year over baseline average age established in FY 04.
3. By 9/30/06, establish a baseline of the percentage of hospitalizations for persons 60 and older that are due to fall-related injuries.
4. By 9/30/06, the percentage of hospitalizations for persons 60 and older due to fall related injuries will decrease by at least 1% below baseline percentage established in FY 04.

Add:

- 1. By 9/30/06, have a collection of promising practice fall prevention literature and web-based information available to the aging network and general public**
- 2. By 9/30/06, include up-to-date fall prevention information within at least two statewide or regional trainings provided by the aging network, AAAs, Michigan State Housing Development Authority (MSHDA), or other housing organizations.**

V. B. HOME REPAIR AND MODIFICATION STRATEGY

Increase older adults' access to home repair and environmental modification services.

Indicators:

1. Indicator completed in FY 2004.
2. By 3/30/05, have home repair and environmental modification literature and web-based information available to the aging network and general public. **Completed.**
3. By 9/30/06, OSA will encourage AAAs to develop affordable home repair and environmental modification programs through their program development objectives. At least two programs will be developed statewide.

V. C. HOUSING OPTIONS STRATEGY

Increase the availability of affordable assisted living and supportive housing options.

Indicators:

Delete #1-3:

1. By 9/30/06, establish a baseline in reported available, affordable housing options in all PSAs.
2. Indicator deleted for FY 2005.
3. By 9/30/06, there will be a 5% increase over the FY 04 baseline in reported available affordable housing options in the majority of Planning and Service Areas.

Add:

1. By 12/30/05, AAAs will report on how many new affordable housing projects (affordable senior apartments, affordable supportive housing, affordable assisted living) they helped develop within their Planning and Service Areas (PSA).

2. By 12/30/05, AAAs will meet with OSA and MSHDA staff to review results and implications of a AAA Housing Survey, and develop recommendations for supporting state and regional efforts to increase decent affordable housing options for older adults.

3. By 9/30/06, OSA will provide at least 15 consumers with technical assistance for identifying residential alternatives.

V. D. HOUSING INFORMATION STRATEGY

Increase access to information about preserving, restoring, developing, and improving “older adult friendly” neighborhoods and communities; information is intended for older adults, family members, community planners and private developers.

Indicators:

Delete #1-4:

1. By 9/30/06, establish a baseline on the percentage of people aged 65+ who own their homes.

2. By 9/30/06, increase by at least 1 % over the baseline established in FY04 the percentage of persons aged 65+ who own their own homes.

3. By 9/30/06, establish a baseline average length of stay for assisted living residents.

4. By 9/30/06, increase by at least one year over the FY 04 baseline the average length of stay for residents in assisted living.

Add:

1. By 9/30/06, OSA will develop a written and web-based package of materials, promising practices and website links on:

-Elder Friendly Communities

-Naturally Occurring Retirement Communities

-Homeowner Retention/Foreclosure Prevention Programs

2. By 9/30/06, OSA’s miseniors.net website will provide a mechanism for visitors to search for available senior apartments, Adult Foster Care Homes, Homes for the Aged, Assisted Living, and Nursing Homes.

V. E. TEMPORARY/EMERGENCY HOUSING STRATEGY

Increase the availability of temporary/emergency shelter options that are capable of meeting the special needs of vulnerable elderly.

Indicator:

Delete:

1. By 9/30/06, the number of providers with aging experience and training available to provide temporary/emergency shelter for persons aged 60+ will increase in at least 1/3 of the PSA's from a baseline reported in FY 04.

Add:

1. By 9/30/06, OSA will work with the Michigan Coalition Against Homelessness to identify age-related educational needs of temporary/emergency shelter staff, and make available geriatric awareness materials and aging training resources that can enhance the ability of the shelters to modify their environments and staff approaches to better address the needs of the frail elderly.

V. F. OLDER ADULT MOBILITY, TRANSPORTATION AND TRAFFIC SAFETY STRATEGY

Work with state, local and aging community partners to improve older adults' mobility through older adult traffic safety and access to accessible transportation services.

Indicators:

1. Indicator completed in FY 2004.

2. By 9/30/06, publish a "State of the State's Elderly Transportation" that will report on the financial support, number of riders, units of service, and degree of unmet need for elder-oriented transportation services.

Revise date:

3. By **9/30/06**, develop, pilot, and evaluate three county-based Older Adult Traffic Death Review Boards.

4. By 9/30/06, analyze Michigan Department of Transportation data on funding levels for para-transit and volunteer driver programs to measure success of advocacy efforts.

V. G. ENERGY ASSISTANCE STRATEGIES

Increase awareness of energy assistance, consumer choice, weatherization, and home heating credit programs.

Indicators:

Revision:

1. By 9/30/05, OSA will create a web page devoted to information assistance and home heating tax credits; it will also establish a link to the Michigan Public Service Commission. Baseline data on the number of people visiting this site will be collected for analysis. A goal is to increase by 2% the number of visits for information on energy assistance, consumer choice, weatherization, and home heating credit programs.

It was found that OSA's website did not have the capacity to establish its own web page, given the huge volume of information on energy assistance and home heating tax credits. Instead, a link was established from OSA's mi.seniors.net website to the MI Public Service Commission's website, enabling older adults to access this information directly. This has been completed.

Eliminate:

2. By 9/30/05, establish a baseline of the percentage of visit to OSA's miseniors.net website for Issue Alerts; increase by 2% the number of site visits for Issue Alerts.

OSA no longer uses the Issue Alert format. Instead, informational articles are placed on the OSA website.

3. Increase awareness by the AAAs of energy assistance programs, consumer choice, weatherization, and home heating credit programs.

Energy assistance information will be shared through the newly established Communications Group being convened by OSA, and including AAA public information officers.

4. By 9/30/06, information about energy assistance, consumer choice, weatherization, and home heating credit programs will be written into area plans.

V. H. HOUSING NEEDS AND PROGRAM DEVELOPMENT STRATEGY

Identify regional housing needs of older adults in all AAA Planning and Service Areas through development, dissemination, and analysis of a housing & related services survey.

Indicators:

1. By 9/30/05, OSA will conduct an analysis of the housing survey results and draft initial recommendations. **Completed.**

2. By 6/30/05, AAAs will either indicate how they plan to address affordable housing needs for seniors in their area through a narrative description, or by identifying a new program development objective within their FY 06 Area Implementation Plans. **Completed.**

NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM

The Michigan Office of Services to the Aging is committed to developing a full continuum of caregiver services, including information, assistance, caregiver education and support, respite and supplemental services. Federal funds available through Title III-E - National Family Caregiver Support Program (NFCSP) - will be combined with state respite and tobacco settlement funding to address the needs of caregivers as a separate target population and as early as possible in the caregiving process.

All funds available for the NFCSP and state supported respite will be allocated to Michigan's 16 AAAs through the approved intrastate funding formula. AAAs will allocate these funds within the established parameters of the NFCSP and will have incorporated a full range of caregiving services and activities during the multi-year and annual plan process.

During FY 05, Michigan received more than \$5 million in funding from Title III-E to support the National Family Caregiver Support Program. An additional \$7.2 million was allocated from other state resources to provide respite for caregivers during this fiscal year. By 9/30/05, 500,000 units of service will be provided to caregivers through the NFCSP.

AAAs are required to designate at least one agency or organization as a focal point for caregiving information and services within the planning and service area. A portion of the resources allocated by formula for the National Family Caregiver Program will also support services for grandparents raising grandchildren and other older relative caregivers. Statewide standards specific to the National Family Caregiver Program have been approved for caregiver supplemental services, caregiver training and support groups, and kinship caregiver respite.

Caregivers of disabled adults over the age of 18 are eligible for respite services through the tobacco settlement-funded Caregiver Respite Program. Kinship caregivers under the age of 60 remain a non-served population, although funds from the Strong Families/Safe Children Initiative, administered by the Family Independence Agency, serves this population in some communities. Although older caregivers over 60 years of age can be served through traditional Title III funding, this remains a gray area that should be clarified and included as part of the NFCSP target population.

OSA has completed development of a hiring guide to assist caregivers in recruiting, hiring, and supervising paid caregivers in the home. This hiring guide is available on the OSA website and in print version. **During FY 05, OSA, in conjunction with the Dementia Coalition Respite Work group, developed a "Respite Care Fact Sheet" to assist family caregivers with disease-specific questions to consider when hiring a paid caregiver. This fact sheet is also available on the OSA website. OSA held a**

public forum on caregiver issues to gather statewide information on the impact the NFCSP has had in the state, and the direction OSA should take in developing its long term care public policy agenda

ASSURANCES AND REQUIRED ACTIVITIES

By signing this document, the authorized official commits the State Agency on Aging to performing all listed assurances and required activities.

Sec. 305(a)-(c)

ORGANIZATION

(a)(2)(A) The State agency shall, except as provided in subsection (b)(5), designate for each such area (planning and service area) after consideration of the views offered by the unit or units of general purpose local government in such area, a public or private nonprofit agency or organization as the area agency on aging for such area.

(a)(2)(B) The State agency shall provide assurances, satisfactory to the Assistant Secretary, that the State agency will take into account, in connection with matters of general policy arising in the development and administration of the State plan for any fiscal year, the views of recipients of supportive services or nutrition services, or individuals using multipurpose senior centers provided under such plan.

(a)(2)(E) The State agency shall provide assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, with particular attention to low-income minority individuals and older individuals residing in rural areas and include proposed methods of carrying out the preference in the State plan.

(a)(2)(F) The State agency shall provide assurances that the State agency will require use of outreach efforts described in section 307(a)(16).

(a)(2)(G)(ii) The State agency shall provide an assurance that the State agency will undertake specific program development, advocacy, and outreach efforts focused on the needs of low-income minority older individuals and older individuals residing in rural areas.

(c)(5) In the case of a State specified in subsection (b)(5), the State agency and area agencies shall provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service areas.

Sec. 306(a) AREA PLANS

(2) Each area agency on aging shall provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services-

(A) services associated with access to services (transportation, outreach, information and assistance, and case management services);
(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
(C) legal assistance; and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

(4)(A)(i) Each area agency on aging shall provide assurances that the area agency on aging will set specific objectives for providing services to older individuals with greatest economic need and older individuals with greatest social need, include specific objectives for providing services to low-income minority individuals and older individuals residing in rural areas, and include proposed methods of carrying out the preference in the area plan.

(4)(A)(ii) Each area agency on aging shall provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will--

(I) specify how the provider intends to satisfy the service needs of low-income minority individuals and older individuals residing in rural areas in the area served by the provider;

(II) to the maximum extent feasible, provide services to low-income minority individuals and older individuals residing in rural areas in accordance with their need for such services; and

(III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals and older individuals residing in rural areas within the planning and service area.

(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each area agency on aging shall--

(I) identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

(4)(B)(i) Each area agency on aging shall provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on--

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;
(V) older individuals with limited English-speaking ability; and
(VI) older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals);
and inform the older individuals referred to in (A) through (F), and the caretakers of such individuals, of the availability of such assistance.

(4)(C) Each area agency on aging shall provide assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

(5) Each area agency on aging shall provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, with agencies that develop or provide services for individuals with disabilities.

(9) Each area agency on aging shall provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

(11) Each area agency on aging shall provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including-

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

(B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

(13)(A) Each area agency on aging shall provide assurances that the area agency on aging will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

(13)(B) Each area agency on aging shall provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State agency--

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship.

(13)(C) Each area agency on aging shall provide assurances that the area agency will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.

(13)(D) Each area agency on aging shall provide assurances that the area agency will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.

(13)(E) Each area agency on aging shall provide assurances that the area agency will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

(14) Each area agency on aging shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(15) Each area agency on aging shall provide assurances that preference in receiving services under this title will not be given by the area agency on aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title.

Sec. 307 STATE PLANS

(7)(A) The plan shall provide satisfactory assurance that such fiscal control and fund accounting procedures will be adopted as may be necessary to assure proper disbursement of, and accounting for, Federal funds paid under this title to the State, including any such funds paid to the recipients of a grant or contract.

(7)(B) The plan shall provide assurances that-

- (i) no individual (appointed or otherwise) involved in the designation of the State agency or an area agency on aging, or in the designation of the head of any subdivision of the State agency or of an area agency on aging, is subject to a conflict of interest prohibited under this Act;
- (ii) no officer, employee, or other representative of the State agency or an area agency on aging is subject to a conflict of interest prohibited under this Act; and
- (iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

(9) The plan shall provide assurances that the State agency will carry out, through the Office of the State Long-Term Care Ombudsman, a State Long-Term Care Ombudsman program in accordance with section 712 and this title, and will expend for such purpose an amount that is not less than an amount expended by the State agency with funds received under this title for fiscal year 2000, and an amount that is not less than the amount expended by the State agency with funds received under title VII for fiscal year 2000.

(10) The plan shall provide assurance that the special needs of older individuals residing in rural areas will be taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

(11)(A) The plan shall provide assurances that area agencies on aging will--
(i) enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance;
(ii) include in any such contract provisions to assure that any recipient of funds under division (A) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and
(iii) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

(11)(B) The plan contains assurances that no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the area agency on aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

(11)(D) The plan contains assurances, to the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals;

(11)(E) The plan contains assurances that area agencies on aging will give priority to legal assistance related to income, health care, long term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

(12) The plan shall provide, whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals, the plan contains assurances

that any area agency on aging carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for--

- (A) public education to identify and prevent abuse of older individuals;
- (B) receipt of reports of abuse of older individuals;
- (C) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and
- (D) referral of complaints to law enforcement or public protective service agencies where appropriate.

(13) The plan shall provide assurances that each State will assign personnel (one of whom shall be known as a legal assistance developer) to provide State leadership in developing legal assistance programs for older individuals throughout the State.

(14) The plan shall provide assurances that, if a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the area agency on aging for each such planning and service area—

- (A) to utilize in the delivery of outreach services under section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability; and
- (B) to designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include--
 - (i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and
 - (ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effectively linguistic and cultural differences.

(16) The plan shall provide assurances that the State agency will require outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on--

- (A) older individuals residing in rural areas;
- (B) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- (C) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- (D) older individuals with severe disabilities;
- (E) older individuals with limited English-speaking ability; and
- (F) older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and inform the older

individuals referred to in clauses (A) through (F) and the caretakers of such individuals, of the availability of such assistance.

(17) The plan shall provide, with respect to the needs of older individuals with severe disabilities, assurances that the State will coordinate planning, identification, assessment of needs, and service for older individuals with disabilities with particular attention to individuals with severe disabilities with the State agencies with primary responsibility for individuals with disabilities, including severe disabilities, to enhance services and develop collaborative programs, where appropriate, to meet the needs of older individuals with disabilities.

(18) The plan shall provide assurances that area agencies on aging will conduct efforts to facilitate the coordination of community-based, long term care services, pursuant to section 306(a)(7), for older individuals who--

(A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;

(B) are patients in hospitals and are at risk of prolonged institutionalization; or

(C) are patients in long term care facilities, but who can return to their homes if community-based services are provided to them.

(19) The plan shall include the assurances and description required by section 705(a).

(20) The plan shall provide assurances that special efforts will be made to provide technical assistance to minority providers of services.

(21) The plan shall

(A) provide an assurance that the State agency will coordinate programs under this title and programs under title VI, if applicable; and

(B) provide an assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title, if applicable, and specify the ways in which the State agency intends to implement the activities.

(22) If case management services are offered to provide access to supportive services, the plan shall provide that the State agency shall ensure compliance with the requirements specified in section 306(a)(8).

(23) The plan shall provide assurances that demonstrable efforts will be made--

(A) to coordinate services provided under this Act with other State services that benefit older individuals; and

(B) to provide multigenerational activities, such as opportunities for older individuals to serve as mentors or advisers in child care, youth day care, educational assistance, at-risk youth intervention, juvenile delinquency treatment, and family support programs.

(24) The plan shall provide assurances that the State will coordinate public services within the State to assist older individuals to obtain transportation services associated with access to services provided under this title, to services under title VI, to comprehensive counseling services, and to legal assistance.

(25) The plan shall include assurances that the State has in effect a mechanism to provide for quality in the provision of in-home services under this title.

(26) The plan shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the State agency or an area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

Sec. 308 PLANNING, COORDINATION, EVALUATION, AND ADMINISTRATION OF STATE PLANS

(b)(3)(E) No application by a State under subparagraph (b)(3)(A) shall be approved unless it contains assurances that no amounts received by the State under this paragraph will be used to hire any individual to fill a job opening created by the action of the State in laying off or terminating the employment of any regular employee not supported under this Act in anticipation of filling the vacancy so created by hiring an employee to be supported through use of amounts received under this paragraph.

Sec. 705 ADDITIONAL STATE PLAN REQUIREMENTS

(1) The State plan shall provide an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter.

(2) The State plan shall provide an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle.

(3) The State plan shall provide an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights.

(4) The State plan shall provide an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter.

(5) The State plan shall provide an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5).

(6) The State plan shall provide an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under Chapter 3—

(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for--

(i) public education to identify and prevent elder abuse;

(ii) receipt of reports of elder abuse;

(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and

(iv) referral of complaints to law enforcement or public protective service agencies if appropriate;

(B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and

(C) all information gathered in the course of receiving reports and making referrals shall remain confidential except--

(i) if all parties to such complaint consent in writing to the release of such information;

(ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or

(iii) upon court order.

REQUIRED ACTIVITIES

Sec. 307(a), STATE PLANS

(1)(A) The State Agency requires each area agency on aging designated under section 305(a)(2)(A) to develop and submit to the State agency for approval, in accordance with a uniform format developed by the State agency, an area plan meeting the requirements of section 306; and

(B) The State plan is based on such area plans.

Note: THIS SUBSECTION OF STATUTE DOES NOT REQUIRE THAT AREA PLANS BE DEVELOPED PRIOR TO STATE PLANS AND/OR THAT STATE PLANS DEVELOP AS A COMPILATION OF AREA PLANS.

(2) The State agency:

(A) evaluates, using uniform procedures described in section 202(a)(29), the need for supportive services (including legal assistance pursuant to 307(a)(11), information and assistance, and transportation services), nutrition services, and multipurpose senior centers within the State;

(B) has developed a standardized process to determine the extent to which public or private programs and resources (including volunteers and programs and services of voluntary organizations) have the capacity and actually meet such need;

(4) The State agency conducts periodic evaluations of, and public hearings on, activities and projects carried out in the State under titles III and VII, including evaluations of the effectiveness of services provided to individuals with greatest economic need, greatest social need, or disabilities, with particular attention to low-income minority individuals and older individuals residing in rural areas. Note: "Periodic" (defined in 45CFR Part 1321.3) means, at a minimum, once each fiscal year.

(5) The State agency:

(A) affords an opportunity for a public hearing upon request, in accordance with published procedures, to any area agency on aging submitting a plan under this title, to any provider of (or applicant to provide) services;

(B) issues guidelines applicable to grievance procedures required by section 306(a)(10); and

(C) affords an opportunity for a public hearing, upon request, by an area agency on aging, by a provider of (or applicant to provide) services, or by any recipient of services under this title regarding any waiver request, including those under Section 316.

(6) The State agency will make such reports, in such form, and containing such information, as the Assistant Secretary may require, and comply with such requirements as the Assistant Secretary may impose to insure the correctness of such reports.

- (8)(A) No supportive services, nutrition services, or in-home services are directly provided by the State agency or an area agency on aging in the State, unless, in the judgment of the State agency--
- (i) provision of such services by the State agency or the area agency on aging is necessary to assure an adequate supply of such services;
 - (ii) such services are directly related to such State agency's or area agency on aging's administrative functions; or
 - (iii) such services can be provided more economically, and with comparable quality, by such State agency or area agency on aging.

Signature and Title of Authorized Official

Date

STATE PLAN PROVISIONS AND INFORMATION REQUIREMENTS

OSA'S RESPONSE TO THE PROVISIONS AND INFORMATION REQUIREMENTS IS INDICATED IN BOLD.

Section I. State Plan Information Requirements

Information required by Sections 102, 305, 307 and 705 that must be provided in the State Plan:

102(19)(G) – (required only if the State funds in-home services not already defined in Sec. 102(19)) The term “in-home services” includes other in-home services as defined by the State agency in the State plan submitted in accordance with Sec. 307.

The OSA Operating Standards for Service Programs (pages 25-55) define the following in-home services and establish minimum standards for them:

- **Chore** – Non-continuous household maintenance tasks intended to increase the safety of the individual(s) living at the residence.
- **Home Care Assistance** – Provision of in-home assistance with activities of daily living and routine household tasks to maintain an adequate living environment for older persons with functional limitations. Home care assistance does not include skilled nursing services.
- **Home Injury Control** – Providing adaptations to the home environment of an older adult in order to prevent or minimize the occurrence of injuries. Home injury control does not include any structural or restorative home repair, chore or homemaker activities.
- **Homemaking** – Performance of routine household tasks to maintain an adequate living environment for older individuals with functional limitations. Homemaking does not include the provision of chore or personal care tasks.
- **Home Delivered Meals** – The provision of nutritious meals to homebound older persons.
- **Home Health Aide** – Performance of health-oriented services prescribed for an individual by a physician which may include: assistance with activities of daily living, assisting with a prescribed exercise regimen, supervising the individual's adherence to prescribed medication and/or special diets, changing non-sterile dressing, taking blood pressure, and other health monitoring activities.
- **Medication Management** – Direct assistance to care management clients in managing the use of both prescription and over-the-counter medication.
- **Personal Care** – Provision of in-home assistance with activities of daily living for an individual, including assistance with bathing, dressing, grooming, toileting, transferring, eating and ambulation.
- **Personal Emergency Response System** – A service system utilizing electronic devices designed to monitor client safety and provide access to emergency

crisis intervention for medical or environmental emergencies through the provision of a communication connection system.

- **Respite Care** – Provision of companionship, supervision and/or assistance with activities of daily living for persons with mental or physical disabilities and frail elder persons in the absence of the primary caregiver(s). Respite care may be provided at locations other than the client's residence.
- **Friendly Reassurance** – Making regular contact, through either telephone or in-home visits, with homebound older persons to assure their well-being and safety, and to provide companionship and social interaction.

Section 305(a)(2)(E)

The State agency shall provide assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, with particular attention to low-income minority individuals and older individuals residing in rural areas and include proposed methods of carrying out the preference in the State plan;

OSA provides assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, with particular attention to low-income minority individuals and older individuals residing in rural areas. Methods of carrying out this preference are found on pages 6-7 of this State Plan; in the multi-year 2004-06 Area Plan Approval Criteria (pages 3-4); and in the multi-year 2004-06 Area Plan Instructions (page 8).

Section 307(a)

(2) The plan shall provide that the State agency will:

(C) Specify a minimum proportion of the funds received by each area agency on aging in the State to carry out part B that will be expended (in the absence of a waiver under sections 306(b) or 316) by such area agency on aging to provide each of the categories of services specified in section 306(a)(2) (Note: those categories are access, in-home, and legal assistance).

OSA specifies a minimum proportion of funds received by each AAA to carry out Part B will be expended on access, in-home, and legal assistance services.

On January 20, 1989, the Commission on Services to the Aging adopted a policy requiring that 50% of the Title III-B funds are expended on access, in-home, and legal assistance services. Within the 50%, a minimum of 8% was to be expended for access services, 18% for in-home services, and 5% for legal assistance. Minimum expenditures for priority services are established by OSA's Operating Standards for AAAs under Standard C-9, Fiscal Management (page 51).

On November 19, 1993, the Commission on Services to the Aging removed the maintenance of effort requirement for legal services and established a minimum 8% statewide minimum level. If statewide expenditures drop below 8%, the following year's minimum for each area agency is increased above the 5% to assure the statewide minimum level is maintained.

On June 17, 2005, the Commission on Services to the Aging revised the Operating Standards for AAAs under Standard C-9, Fiscal Management, to remove the 50% aggregate requirement and establish that a minimum of 10% be expended for access services and 10% for in-home services. The 5% minimum for legal assistance is unchanged.

Section (307(a)(3)

The plan shall:

(A) include (and may not be approved unless the Assistant Secretary approves) the statement and demonstration required by paragraphs (2) and (4) of section 305(d) (concerning distribution of funds); (Note: the “statement and demonstration” are the numerical statement of the intrastate funding formula, and a demonstration of the allocation of funds to each planning and service area)

A numerical statement of the intrastate funding formula and demonstration of the allocation of funds to each PSA are found on pages 8-10 of the State Plan.

(B) with respect to services for older individuals residing in rural areas:

(i) provide assurances the State agency will spend for each fiscal year of the plan, not less than the amount expended for such services for fiscal year 2000.

With respect to services for older individuals residing in rural areas, OSA assures it will spend, for each fiscal year of the State Plan, not less than the amount expended for such services in FY 2000.

(ii) identify, for each fiscal year to which the plan applies, the projected costs of providing such services (including the cost of providing access to such services).

Based on federal and state service expenditures, it is anticipated the projected costs of providing these services will remain the same for each fiscal year to which the plan applies.

(iii) describe the methods used to meet the needs for such services in the fiscal year preceding the first year to which such plan applies.

OSA describes the methods used to meet the needs for such services in the State Plan. Given that Michigan has large geographic parts of the state that are rural, OSA is acutely aware of the special circumstances in serving older adults residing in rural areas. The geographic base applied to the intrastate funding formula balances the formula to account for geographic differences. This is described on page 9 of the State Plan – Geographic Base.

Section 307(a)(8)) (Include in plan if applicable)

(B) Regarding case management services, if the State agency or area agency on aging is already providing case management services (as of the date of submission of the plan) under a State program, the plan may specify that such agency is allowed to continue to provide case management services.

Regarding case management services, OSA specifies that all area agencies on aging may provide these services directly.

(C) The plan may specify that an area agency on aging is allowed to directly provide information and assistance services and outreach.

Regarding information and assistance and outreach, OSA specifies that all area agencies may provide these services directly.

Section 307(a)(10)

The plan shall provide assurance that the special needs of older individuals residing in rural areas are taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

The State Plan provides assurance that the special needs of older individuals residing in rural areas are taken into consideration, describes how those needs have been met, and how funds have been allocated to meet those needs.

The OSA intrastate funding formula distributes by geographic area within a given PSA. All of Michigan's planning and service areas with large rural populations have large geographic areas. The OSA has decentralized NAPIS to retrieve and analyze data at the county level. OSA can interface this data with census data to determine percentages of people served in rural areas. Discussion of this provision can be found in the State Plan, Geographic Base (page 9) and the multi-year 2004-06 Area Plan Approval Criteria (Program Development, page 5) and the multi-year 2004-06 Area Plan Instructions (page 11).

Section 307(a)(15)

The plan shall, with respect to the fiscal year preceding the fiscal year for which such plan is prepared--

(A) identify the number of low-income minority older individuals in the State; and
The State Plan identifies the number of low-income minority older individuals in the State in Formula Factor Importance (page 8).

(B) describe the methods used to satisfy the service needs of such minority older individuals.

The State Plan specifies the methods used to satisfy the service needs of such minority older individuals. Under OSA's Operating Standards for AAAs, Standard C-4 (page 26), AAAs require contractors, as part of their contracting policies and contracting instruments, to target minority older adults, in particular those who are low-income. In addition, AAAs require that contractors have a methodology as to how targeting will be carried out. OSA's Title III reporting system is used to verify AAA targeting goals. Goal II of the State Plan addresses a targeted outreach strategy (pages 19-20).

Section 307(a)(21)

The plan shall:

(B) provide an assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title (title III), if applicable, and specify the ways in which the State agency intends to implement the activities .

The State Plan specifies the ways in which OSA intends to implement activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under Title III.

In addition to the above-mentioned general minority targeting requirements contained in OSA's Operating Standards for AAAs, there are specific targeting requirements assuring that elders of Native American tribes receive OAA-funded services equivalent to the services received by non-Native American elders. This provision is found in the OSA Operating Standards for AAAs, Standard C-4 (page 30). Service levels are monitored by OSA through the Title III reporting system. The Targeting Summary on page 8 of the State Plan demonstrates that the percentage of Native Americans served in fiscal years 2003 and 2004 exceeded their percentage of the total population.

Section 705(a)(7)

In order to be eligible to receive an allotment under this subtitle, a State shall include in the State plan submitted under section 307:

(7) a description of the manner in which the State agency will carry out this title in accordance with the assurances described in paragraphs (1) through (6).

(1) an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter.

The Office of the State Long Term Care Ombudsman, funded under Title VII of the Older Americans Act, is responsible for statewide management of the long term care ombudsman program. In Michigan, the Office of the State Long Term Care Ombudsman is operating within the Office of Services to the Aging. The State program funds local ombudsman programs that are mandated and coordinated by AAAs. Three AAAs directly provide local ombudsman services, while the remaining agencies contract with non-profit entities for these local services.

(2) an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle.

Annual State Plan hearings, OSA's www.miseniors.net website, and the State Advisory Council provide ongoing opportunities for receiving comments, concerns, and questions from older persons and interested others. Likewise, OSA's website, serves as an ongoing vehicle for receiving comments, concerns and questions from older persons and/or interested others.

(3) an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights;

The OSA legal services developer works with AAAs to improve the delivery of legal services that help older adults secure and maintain benefits and rights. OSA also works with private sector agencies, including Elder Law of Michigan and the Elder Law Section of the State Bar of Michigan, to ensure the availability of services for the protection of benefits and rights. Finally, OSA operates its state health insurance counseling program through the AAAs. This program ensures that older people have access to their Medicare and Medicaid benefits.

(4) an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter.

Funds for these activities are protected through the OSA maintenance of effort policy and practice. Expenditures are monitored annually through the Area Plan budget review process.

(5) an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5).

Any entity applying for designation as a local long term care ombudsman must comply with minimum standards set forth by the Commission on Services to the Aging. These standards protect vulnerable elderly residents in long term care facilities by ensuring that organizations providing local ombudsman services are free from conflict of interest; have personnel with the skills and training needed to resolve problems on behalf of residents; and operate in compliance with program instructions as required by federal and state authorizing legislation. Discussion of this requirement may be found in Operating Standards for Service Programs, Standard C-11 (pages 93-95).

(6) an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3--

(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for:

(i) public education to identify and prevent elder abuse;

(ii) receipt of reports of elder abuse;

(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and

(iv) referral of complaints to law enforcement or public protective service agencies if appropriate;

(B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and

(C) all information gathered in the course of receiving reports and making referrals shall remain confidential except--

- (i) if all parties to such complaint consent in writing to the release of such information;
- (ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or
- (iii) upon court order.

OSA collaborates with the Department of Human Services - Adult Protective Services Division - and the Senior Exploitation and Abuse Quick Response Team (SEAQRT). The SEAQRT includes members from the Michigan Department of Community Health, Attorney General, State Police, and other agencies - to implement a centralized referral and follow-up system for reports of abuse, neglect, and financial exploitation of vulnerable adults. In addition, OSA is required by MCL 750.174a (2000 P.A. 222) to report suspected cases of financial exploitation to the Family Independence Agency.

OSA provides staff and grant resources for the establishment of TRIAD groups. These groups-comprised of sheriffs, city police agency personnel, and local senior groups-work together to reduce financial exploitation of older adults at the local level. OSA awards grants each year for public education events on scams, schemes, and swindles affecting older adults, as well as for the preparation and distribution of a TRIAD newsletter and brochures alerting seniors to specific frauds. OSA participates in the state TRIAD, as well as consumer groups such as Senior Advocate Consumer Coalition.

The Governor's Elder Abuse Task Force held its first meeting June 24, 2005. OSA is the lead agency in partnership with other state agencies: the Office of Financial and Insurance Services, the Michigan State Police, the Department of Community Health and the Department of Human Services. The Elder Abuse Task Force will address issues including prevention and public education about elder abuse and better coordination among agencies addressing elder abuse.

OFFICE OF SERVICES TO THE AGING
Proposed Area Agency Service Allotments
For the period 10/1/2005 – 9/30/2006

Area Agency	Intra-State Formula	Geographic Base	Supportive Services	Congregate Meals	Home Del'd Meals	Caregiver Support (III-E)	Preventive Health	Eld Abuse Prevention	St-Access Services	St-In Home Services	St-Cong Meals	St-Home Delivered Meals	St-Alt Care	St-Respite Care	Tobacco Respite Care	St-Nurse Home Omb's	St-NHO Formula	Fed Admin FY 2006	State Admin FY 2006	CM Services	NSIP
1A	0.1245	0.0027	1,109,840	1,270,389	589,003	503,580	81,737	19,386	102,606	338,100	48,742	1,221,498	405,793	129,910	470,112	52,855	0.1207	394,950	67,536	834,203	726,673
1B	0.2473	0.0690	2,250,441	2,575,990	1,194,331	1,021,118	165,740	39,309	208,055	685,571	98,834	2,476,852	822,833	237,727	953,255	73,035	0.1716	800,846	136,944	1,001,014	1,533,681
1C	0.1018	0.0081	911,735	1,043,627	483,867	413,692	67,147	15,925	84,291	277,750	40,041	1,003,462	333,360	111,183	386,198	38,661	0.0849	324,452	55,481	583,953	699,599
02	0.0309	0.0362	301,090	344,645	159,791	136,617	22,175	5,259	27,836	91,724	13,223	331,382	110,088	53,461	127,537	18,480	0.0340	107,146	18,322	250,252	230,557
3A	0.0212	0.0099	195,796	224,120	103,911	88,841	14,420	3,420	18,102	59,647	8,599	215,495	71,589	43,508	82,936	9,001	0.0185	69,676	11,915	158,916	130,807
3B	0.0210	0.0223	202,963	232,324	107,715	92,093	14,948	3,545	18,764	61,830	8,914	223,383	74,210	44,185	85,972	12,332	0.0269	72,227	12,351	165,244	141,935
3C	0.0114	0.0178	114,289	130,822	60,654	51,857	8,417	1,996	10,566	34,817	5,019	125,787	41,788	35,803	48,411	8,883	0.0182	40,671	6,955	92,988	91,530
04	0.0334	0.0296	318,575	364,660	169,071	144,550	23,462	5,565	29,452	97,050	13,991	350,625	116,481	55,114	134,944	18,004	0.0328	113,369	19,386	250,252	146,605
05	0.0564	0.0323	525,193	601,168	278,725	238,302	38,679	9,174	48,555	159,994	23,065	578,032	192,028	74,645	222,464	22,405	0.0439	186,896	31,959	417,149	355,497
06	0.0358	0.0301	340,292	389,519	180,596	154,405	25,062	5,944	31,460	103,666	14,945	374,528	124,422	57,167	144,143	18,678	0.0345	121,097	20,707	250,252	218,704
07	0.0791	0.1162	787,730	901,683	418,056	357,426	58,014	13,759	72,826	239,973	34,595	866,981	288,019	99,462	333,671	40,524	0.0896	280,323	47,935	500,505	709,637
08	0.0857	0.1057	838,886	960,239	445,205	380,637	61,782	14,653	77,556	255,557	36,842	923,284	306,724	104,297	355,340	42,110	0.0936	298,528	51,048	500,505	580,263
09	0.0366	0.1199	412,204	471,833	218,760	187,034	30,358	7,200	38,109	125,573	18,103	453,674	150,715	53,964	174,604	24,863	0.0501	146,688	25,083	500,505	349,731
10	0.0334	0.0831	357,176	408,845	189,557	162,065	26,305	6,239	33,021	108,810	15,686	393,110	130,595	58,763	151,295	22,088	0.0431	127,105	21,735	500,505	256,973
11	0.0422	0.2887	583,829	668,286	309,844	264,907	42,998	10,198	53,975	177,857	25,640	642,566	213,467	80,188	247,302	42,546	0.0947	207,763	35,527	500,505	500,170
14	0.0393	0.0284	370,211	423,766	196,475	167,980	27,265	6,467	34,226	112,781	16,259	407,457	135,361	59,995	156,816	22,009	0.0429	131,744	22,528	250,252	160,768
TOTALS	1.0000	1.0000	9,620,249	11,011,914	5,105,559	4,365,104	708,508	168,039	889,400	2,930,700	422,500	10,588,117	3,517,472	1,309,372	4,075,000	466,475	1.0000	3,423,482	585,411	6,757,000	6,833,130
FY-2005 Allotments			11,410,347	12,923,340	5,991,771	5,122,790	708,508	168,039	889,400	2,930,700	422,500	11,024,800	3,666,200	1,309,372	4,075,000	478,000					
Less:																					
State Admin			581,920	659,082	305,576	261,259	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AAA Admin			1,094,075	1,252,344	580,636	496,427	0	0	0	0	0	436,683	148,728	0	0	0	0	0	0	0	0
LTC Omb's			114,103	0	0	0	0	0	0	0	0	0	0	0	0	11,525	0	0	0	0	0
Demonstration Project			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sub-total			9,620,249	11,011,914	5,105,559	4,365,104	708,508	168,039	889,400	2,930,700	422,500	10,588,117	3,517,472	1,309,372	4,075,000	466,475					
7.5% Geo. Base			721,519	825,894	382,917	327,383	53,138	12,603	66,705	219,803	31,688	794,109	263,810	68,203	305,625	0					
Other Bases			0	0	0	0	0	0	0	0	0	0	0	400,000	0	70,000					
Balance for formula			8,898,730	10,186,020	4,722,642	4,037,721	655,370	155,436	822,695	2,710,898	390,813	9,794,008	3,253,662	841,169	3,769,375	396,475					
FY-2005 Allotment Balances			0	0	0	0	0	0	0	0	0	0	0	0	0	0					